Case 20-20194-jrs Doc 1 Filed 01/31/20 Entered 01/31/20 15:27:29 Desc Main Document Page 1 of 66

| Fill in this information to identify your case: | | |
|---|---------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF GEORGIA - GAINESVILLE DIVISION | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|---|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Rico First name Xavier Middle name Richardson Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Edwin Arnold Richardson, Jr. Edwin Richardson | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3091 | | |

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| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | EINs | EINs | | | |
| 5. Where you live | | If Debtor 2 lives at a different address: | | | |
| | 5630 Tallantworth Xing Cumming, GA 30040 | | | | |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | Forsyth | | | | |
| | County | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | PO Box 441181 Kennesaw, GA 30160 | | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. Why you are choosing | Check one: | Check one: | | | |
| this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | |
| Банкі цріс ў | I have another reason. | have lived in this district longer than in any oth district. I have another reason. | | | |

Case number (if known)

Debtor 1 Rico Xavier Richardson

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Case number (if known) Debtor 1 Rico Xavier Richardson

| ar | Report About Any Bu | sinesses ` | You Own | as a Sole Proprie | tor |
|--|---|------------------------|---|-------------------------------------|---|
| 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? | | | | | |
| | | ☐ Yes. | Name | and location of bus | iness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | te & ZIP Code | |
| | it to this petition. | | Check | the appropriate bo | x to describe your business: |
| | | | | Health Care Busir | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate is. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of is, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B). | | |
| | For a definition of <i>small</i> | | I am n | ot filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | |
| | | ☐ Yes. | I am fi | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| art | t 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and | Yes. | What is t | he hazard? | |
| | identifiable hazard to public health or safety? Or do you own any | | | | |
| | property that needs immediate attention? | | | iate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | |
| | • | | | | Number, Street, City, State & Zip Code |

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Debtor 1 Rico Xavier Richardson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Rico Xavier Richardson Page 6 of 66 Case number (if known)

| Part | 6: Answer These Questi | ons for Re | porting Purposes | | | | |
|---|---|--|--|---|---------------------------|--|--|
| 16. | What kind of debts do you have? | | Are your debts primarily consumindividual primarily for a personal, In No. Go to line 16b. | | | C. § 101(8) as "incurred by an | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily busines money for a business or investmen | | | | |
| | | | ☐ No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you owe the | at are not consumer debts o | r business debts | | |
| 17. | Are you filing under Chapter 7? | □ No. | am not filing under Chapter 7. Go to line 18. | | | | |
| Do you estimate that after any exempt property is excluded at administrative expense are paid that funds will | | | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-19 □ 200-99 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | □ 50,00 | 01-50,000 01-100,000 than100,000 | |
| 19. | How much do you estimate your assets to be worth? | ■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 milli □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 m | ion ☐ \$1,00 □ \$10,0 | ,000,001 - \$1 billion 00,000,001 - \$10 billion 000,000,001 - \$50 billion than \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | \$100,0 | 0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 m | on | ,000,001 - \$1 billion 00,000,001 - \$10 billion 000,000,001 - \$50 billion e than \$50 billion | |
| Part | 7: Sign Below | | | | | | |
| For | you | I have exa | amined this petition, and I declare u | nder penalty of perjury that | the information provided | d is true and correct. | |
| | | | hosen to file under Chapter 7, I am ates Code. I understand the relief a | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | |
| | | I request | relief in accordance with the chapte | er of title 11, United States C | ode, specified in this pe | etition. | |
| | | bankrupto and 3571. | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | | Rico Xa | Xavier Richardson vier Richardson of Debtor 1 | Signature | of Debtor 2 | | |
| | | Executed | on January 31, 2020 | Executed | on | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | | |

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Debtor 1 Rico Xavier Richardson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| | pher J. Kiefer, GA Bar No. Attorney for Debtor | Date | January 31, 2020 MM / DD / YYYY | |
|--|--|---------------|------------------------------------|--|
| Christopho Printed name | er J. Kiefer, GA Bar No. 417247 | | | |
| Clark & Wa | ashington, P.C. | | | |
| 3300 North Building 3 Atlanta, G | | | | |
| | City, State & ZIP Code | | | |
| Contact phone | 770-488-9338 | Email address | cworders@cw13.com | |
| GA Bar number & St | tate | | | |

| Fil | I in this inforn | nation to identify you | r case: | | | |
|------------------|----------------------------|--|---|---|---|---|
| De | btor 1 | Rico Xavier Rich | nardson | | | |
| | | First Name | Middle Name | Last Name | | |
| 1 - | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF GEORGIA - GAINESVILLI | <u> </u> | |
| Ca | se number | | | | | |
| | nown) | | | | _ | heck if this is an mended filing |
| St Be info | as complete a | of Financial | attach a separate sheet to t | re filing together, both are | ankruptcy equally responsible for sup additional pages, write you | |
| Ра 1. | | etails About Your Ma | rital Status and Where You | Lived Before | | |
| | Married | current maritar state | 13: | | | |
| | □ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than v | where you live now? | | |
| | ■ No □ Yes. Lis | t all of the places you I | ived in the last 3 years. Do no | ot include where you live now | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. sta | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operating u received from all jobs and a have income that you receive | Ill businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$2,731.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Debtor 1 Rico Xavier Richardson

| | | | Debtor 1 | | Debtor 2 | |
|--|---|--|---|--|---|---|
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calen (January 1 to | | 31, 2019) | ■ Wages, commissions, bonuses, tips | \$73,058.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| For the calendary 1 to | | | ■ Wages, commissions, bonuses, tips | \$72,759.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| Include include include include include include and other winnings. List each some number of the include incl | come regardl public benefi If you are filir | ess of wheth t payments; ng a joint cas ne gross inco | er that income is taxable. Ex- pensions; rental income; inte e and you have income that | o previous calendar years? amples of other income are a rest; dividends; money collect you received together, list it outlety. Do not include income the | ted from lawsuits; royalties; a only once under Debtor 1. | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January the date you | | | VA Disability | \$436.00 | | |
| For last calen (January 1 to | | 31, 2019) | VA Disability | \$5,040.00 | | |
| For the calendary 1 to | | | VA Disability | \$5,000.00 | | |
| Part 3: List | : Certain Pav | ments You | Made Before You Filed for | Bankruptcv | | |
| | | | | | | |
| 6. Are either ☐ No. | Neither De | btor 1 nor D | s debts primarily consume ebtor 2 has primarily consu personal, family, or househo | umer debts. Consumer debts | s are defined in 11 U.S.C. § 1 | 01(8) as "incurred by an |
| | • | 90 days befo | re you filed for bankruptcy, d | id you pay any creditor a tota | I of \$6,825* or more? | |
| | □ No. | Go to line 7 | | | | |
| | □ Yes | paid that cre | | id a total of \$6,825* or more i nts for domestic support oblig his bankruptcy case. | | |
| | * Subject to | o adjustment | on 4/01/22 and every 3 year | rs after that for cases filed on | or after the date of adjustmer | nt. |
| Yes. | | | r both have primarily consure you filed for bankruptcy, d | umer debts. id you pay any creditor a tota | I of \$600 or more? | |
| | □ No. | Go to line 7 | | | | |
| | ■ Yes | include pay | | id a total of \$600 or more and obligations, such as child supp | | |

Creditor's Name and Address

Dates of payment

Total amount paid Amount you still owe

Was this payment for ...

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| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | yment for |
|-----|---|---|--|--------------------------------------|--|---|
| | American Cycle Finance 5 Mill Street N Marlborough, MA 01752 | 1/2020 12/2019 11/2019 | \$678.00 | \$3,476.00 | ☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other_ | ord payment |
| | Credit Acceptance Corporation Reg. Agent: Corporation Service Company 40 Technology Parkway South Suite 300 Norcross, GA 30092 | 1/2020 12/2019 11/2019 | \$1,524.00 | \$12,493.00 | ☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other | ord payment |
| 7. | Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | ortners; relatives of any gen control, or owner of 20% o | neral partners; partner or more of their voting | rships of which y securities; and | ou are a genera any managing a | I partner; corporations gent, including one fo |
| | Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment |
| | | | paid | still owe | | |
| | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address | | ments or transfer a Total amount paid | Amount you still owe | | this payment |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | cy, were you a party in an | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below | | erty repossessed, f | oreclosed, garn | ished, attached | l, seized, or levied? |
| | □ No. Go to line 11.■ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | 9 | Value of the |
| | | Explain what happened | d | | | property |

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Debtor 1 Rico Xavier Richardson

| | Creditor Name and Address | Describe the Property | Date | Value of the property | | | |
|-----|--|---|---------------------------|--------------------------|--|--|--|
| | | Explain what happened | | property | | | |
| | Harley Davidson Financial Reg. Agent: CT Corporation | 2016 Harley Davidson Ultra Limited 16634 miles | 1-18-2020 | \$13,780.00 | | | |
| | System 301 S Bedford Street | ■ Property was repossessed. | | | | | |
| | Suite 1 | ☐ Property was foreclosed. | | | | | |
| | Madison, WI 53703 | ☐ Property was garnished. | | | | | |
| | | ☐ Property was attached, seized or levied. | | | | | |
| 11. | Within 90 days before you filed for bank accounts or refuse to make a payment border No ☐ Yes. Fill in the details. | ruptcy, did any creditor, including a bank or financial in pecause you owed a debt? | nstitution, set off any a | mounts from your | | | |
| | Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount | | | |
| Par | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions | | | | | | |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? | | | | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details for each gift. | | | | | | |
| | Gifts with a total value of more than \$60 per person | Describe the gifts | Dates you gave the gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| 14. | Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or | ruptcy, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | total Describe what you contributed | Dates you contributed | Value | | | |
| Par | t 6: List Certain Losses | | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | ıptcy or since you filed for bankruptcy, did you lose any | ything because of thef | t, fire, other disaster, | | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | Date of your loss | Value of property lost | | | |
| | | insurance claims on line 33 of Schedule A/B: Property. | | 4 | | | |
| | Motorcycle stolen in March 2019 from Daytona Beach (owned Outright) | Insurance Settlement | 3/2019 | \$3,900.00 | | | |

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Debtor 1 Rico Xavier Richardson

| Par | t 7: List Certain Payments or Transfers | | | | |
|---|--|--|-----------------|--|------------------------|
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | |
| | □ No■ Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount o paymen |
| | CIN Legal Data Services Box 88229 Milwaukee, WI 53288 Clark & Washington, LLC | Various Pre-bankruptcy Servi | ces | 1/2020 | \$70.00 |
| 17. | Within 1 year before you filed for bankruptcy, did promised to help you deal with your creditors or Do not include any payment or transfer that you listed No Yes. Fill in the details. | to make payments to your creditor | | r transfer any prope | rty to anyone who |
| | Person Who Was Paid Address | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount o paymen |
| 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or include gifts and transfers that you have already listed on this statement. No | | | | | |
| | Yes. Fill in the details. | . | | | |
| | Person Who Received Transfer Address | Description and value of property transferred | | any property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | |
| | New Owner | 2006 Chrysler 300 | \$500 | | 12/2018 |
| | None | | | | |
| 19. | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection | | elf-settled tru | ıst or similar device | of which you are a |
| | Yes. Fill in the details. | | | | |
| | Name of trust | Description and value of the prop | erty transferr | ed | Date Transfer was made |
| Pai | List of Certain Financial Accounts, Instrum | nents, Safe Deposit Boxes, and Sto | rage Units | | |
| 20. | Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or oth houses, pension funds, cooperatives, association | er financial accounts; certificates | of deposit; sh | | , , |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution and Las | t 4 digits of Type of accoun | ntor Da | te account was | l ast halance |

instrument

account number

transfer

Address (Number, Street, City, State and ZIP Code)

before closing or

closed, sold,

moved, or

transferred

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| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number instrument | | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
|-------|--|---|---|-----------------------|--|---|--|
| | PNC Bank, N.A. William Demchak, CEO 222 Delaware Avenue Wilmington, DE 19899 | xxxx- | ■ Checking □ Savings □ Money Market □ Brokerage □ Other | | 12/2019 | \$0.00 | |
| | Do you now have, or did you have within 1 yeash, or other valuables? | year before you filed for | r bankruptcy, an | y safe dep | oosit box or other deposi | tory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit o | , | home within 1 | year befor | e you filed for bankruptc | y? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? | |
| Pari | 9: Identify Property You Hold or Control | , | | | | | |
| | Do you hold or control any property that so for someone. | meone else owns? Incl | ude any propert | y you borr | owed from, are storing fo | or, or hold in trust | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | |
| Par | 10: Give Details About Environmental Info | ormation | | | | | |
| For t | he purpose of Part 10, the following definiti | ons apply: | | | | | |
| | Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these | ne air, land, soil, surface | e water, ground | | | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispo | - | environmental la | aw, wheth | er you now own, operate | , or utilize it or used | |
| | <i>Hazardous material</i> means anything an env hazardous material, pollutant, contaminant, | | as a hazardous | waste, ha | zardous substance, toxic | substance, | |
| Repo | ort all notices, releases, and proceedings the | at you know about, rega | ardless of when | they occu | rred. | | |
| 24. | Has any governmental unit notified you that | you may be liable or po | otentially liable | under or i | n violation of an environr | nental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site | Governmental un | it | Fnviro | onmental law, if you | Date of notice | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, S | | | | Date of Hotios | |

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Case number (if known) Document

| 25. | на | ve you notified any governmental unit o | rany release of nazardous material? | | |
|-------------------|--|---|--|--|--------------------|
| | | No | | | |
| | | Yes. Fill in the details. | | | |
| | | ame of site ddress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | На | ve you been a party in any judicial or ad | ministrative proceeding under any envi | ronmental law? Include settlements | and orders. |
| | | No | | | |
| | | Yes. Fill in the details. | | | |
| | | ase Title ase Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | t 11 | Give Details About Your Business or | Connections to Any Business | | |
| 27. | Wi | thin 4 years before you filed for bankrup | tcy, did you own a business or have an | y of the following connections to a | ny business? |
| | | ☐ A sole proprietor or self-employed | in a trade, profession, or other activity, | either full-time or part-time | |
| | | ☐ A member of a limited liability com | pany (LLC) or limited liability partnersh | ip (LLP) | |
| | | ☐ A partner in a partnership | | | |
| | | ☐ An officer, director, or managing ex | xecutive of a corporation | | |
| | | ☐ An owner of at least 5% of the voti | ng or equity securities of a corporation | | |
| | _ | No. None of the above applies. Go to | | | |
| | _ | | | | |
| | _ | usiness Name | Il in the details below for each business Describe the nature of the business | Employer Identification numb | er |
| | Address (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | Do not include Social Security | |
| | (| ,, - ,, | Name of accountant of bookkeeper | Dates business existed | |
| 28. | | thin 2 years before you filed for bankrup stitutions, creditors, or other parties. | tcy, did you give a financial statement t | o anyone about your business? Inc | lude all financial |
| | | No | | | |
| | LI N | Yes. Fill in the details below. | Date Issued | | |
| | A | ddress | Date Issueu | | |
| | | umber, Street, City, State and ZIP Code) | | | |
| Par | t 12 | Sign Below | | | |
| are i | true a b | ead the answers on this Statement of Fie and correct. I understand that making a pankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571. | a false statement, concealing property, | or obtaining money or property by f | |
| | | co Xavier Richardson | Signature of Debtor 2 | | |
| | | Kavier Richardson ure of Debtor 1 | Signature of Debtor 2 | | |
| Dat | e | January 31, 2020 | Date | | |
| Did ■ N □ Y | 10 | attach additional pages to Your Statem | ent of Financial Affairs for Individuals F | Filing for Bankruptcy (Official Form | 107)? |
| | | I nov or agree to nov company who ! | at an attornoy to halm you fill out have here | intov formo? | |
| Dia ■ N | - | ı pay or agree to pay someone who is no | or an accorney to neip you fill out bankru | ipicy iornis : | |
| | | Name of Person Attach the Bankri | uptcy Petition Preparer's Notice, Declaration | on, and Signature (Official Form 119). | |
| Offic | ial F | orm 107 Stater | nent of Financial Affairs for Individuals Filing | for Bankruptcy | page 7 |

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| | Ca | Se 20-20194-JIS L | Decument Description | 1/20 15.27.29 L | iest main |
|-------------------|--|---|---|------------------------------|---|
| Fill in | this info | rmation to identify your ca | Document Page 16 of 66 | | |
| F 1111 1111 | uns mic | imation to identity your ca | se and this ining. | | |
| Debto | r 1 | Rico Xavier Richard | | | |
| Dahta | - 0 | First Name | Middle Name Last Name | | |
| Debto (Spouse | ı ∠ e, if filing) | First Name | Middle Name Last Name | | |
| | | | | | |
| United | d States E | Sankruptcy Court for the: N | ORTHERN DISTRICT OF GEORGIA - GAINESVILLE D | IVISION | |
| Case | number | | | | ☐ Check if this is an |
| | | | | | amended filing |
| ~ | – | 400A/D | | | |
| Offic | cial F | orm 106A/B | | | |
| <u>Scł</u> | <u>nedu</u> | le A/B: Prope | rty | | 12/15 |
| hink it nforma | fits best. ation. If me every qu | Be as complete and accurate ore space is needed, attach a sestion. | ems. List an asset only once. If an asset fits in more than o as possible. If two married people are filing together, both a separate sheet to this form. On the top of any additional pag- and, or Other Real Estate You Own or Have an Interest In | re equally responsible for s | upplying correct |
| . Do v | ou own o | r have any legal or equitable in | terest in any residence, building, land, or similar property? | | |
| ^ | | , , , , | ,, | | |
| | lo. Go to P | | | | |
| ЦΥ | es. Where | e is the property? | | | |
| | | | | | |
| Part 2: | Describ | e Your Vehicles | | | |
| | | | | | |
| | | | ble interest in any vehicles, whether they are registe | | ehicles you own that |
| omeo | ne else d | rives. If you lease a vehicle, | also report it on Schedule G: Executory Contracts and U | nexpired Leases. | |
| . Car | s, vans, | trucks, tractors, sport utilit | y vehicles, motorcycles | | |
| _ | | | | | |
| | 10 | | | | |
| Y | 'es | | | | |
| | | | | | |
| 3.1 | Make: | Nissan | Who has an interest in the property? Check one | | laims or exemptions. Put ed claims on Schedule D: |
| | Model: | Altima | ■ Debtor 1 only | , | ims Secured by Property. |
| | Year: | 2014 | Debtor 2 only | Current value of the | Current value of the |
| | Approxim | ate mileage: 8400 | | entire property? | portion you own? |
| | Other info | ermation: | ☐ At least one of the debtors and another | | |
| | | | _ | ¢c 400 00 | fc 400 00 |
| | | | Check if this is community property (see instructions) | \$6,400.00 | \$6,400.00 |
| | | Vallenus | | Do not deduct secured a | laims or exemptions. Put |
| 3.2 | Make: | Volkswagon | Who has an interest in the property? Check one | the amount of any secure | ed claims on Schedule D: |
| | Model: | Passat | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. |
| | Year: | 2013 | Debtor 2 only | Current value of the | Current value of the |
| | | ate mileage: 11500 | , | entire property? | portion you own? |
| r | Other info | ermation: | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | \$4,100.00 | \$4,100.00 |

Official Form 106A/B Schedule A/B: Property page 1 Document Page 17 of 66_

| Debte | or 1 _ F | ico Xavier Richardson | Ca | ase number (if known) | |
|--------|-----------------------|--|--|--|--|
| 3.3 | Make: | GMC | Who has an interest in the property? Check one | | ed claims or exemptions. Put |
| 0.0 | Model: | Yukon | _ | | cured claims on Schedule D: Claims Secured by Property. |
| | Year: | 2008 | Debtor 1 only | | |
| | | nate mileage: 213175 | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | formation: | ☐ At least one of the debtors and another | chare property: | portion you own: |
| | Doesn | 1 | At least one of the debtors and another | | |
| | | · · · · | ☐ Check if this is community property (see instructions) | \$3,000.0 | 93,000.00 |
| 3.4 | Make: | Honda | Who has an interest in the property? Check one | | ed claims or exemptions. Put cured claims on Schedule D: |
| | Model: | CBR600RR9 | ■ Debtor 1 only | Creditors Who Have | Claims Secured by Property. |
| | Year: | 2009 | Debtor 2 only | Current value of the | Current value of the |
| | | nate mileage: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other in | formation: | ☐ At least one of the debtors and another | | |
| | | | ☐ Check if this is community property (see instructions) | \$4,180.0 | \$4,180.00 |
| 3.5 | Make: | Dodge | Who has an interest in the property? Check one | | ed claims or exemptions. Put |
| | Model: | Challenger | ■ Debtor 1 only | | cured claims on Schedule D: Claims Secured by Property. |
| | Year: | 2012 | ☐ Debtor 2 only | | |
| | | nate mileage: | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other in | formation: | ☐ At least one of the debtors and another | | |
| | Not Ru | inning | | | |
| | | | ☐ Check if this is community property (see instructions) | \$3,000.0 | 93,000.00 |
| | Yes | ollar value of the portion you ov | vn for all of your entries from Part 2, including a | ny entries for | \$00.000.00 |
| .ра | iges you | have attached for Part 2. Write | that number here | => | \$20,680.00 |
| Part 3 | | be Your Personal and Household I | | | |
| Do y | ou own (| or have any legal or equitable in | nterest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E | | goods and furnishings Major appliances, furniture, linen: | s, china, kitchenware | | |
| | Yes. De | scribe | | | |
| | | Bedroom Furn | iture, W/D | | \$1,200.00 |
| | ectronics camples: | Televisions and radios; audio, vid | deo, stereo, and digital equipment; computers, printe | ers, scanners; music coll | ections; electronic devices |
| | No Yes. De | including cell phones, cameras, i | neura prayers, garnes | | |
| | | 2 TV's 1 Laptor | o, 1 Printer, 2 Game Stations, Cell Phone, I- | Pad | \$800.00 |

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Case number (if known) Document Debtor 1 Rico Xavier Richardson 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$150.00 2 Pistols 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothes \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$600.00 8 Watches, Earrings, Bracelet 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 2 Bulldogs \$300.00 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,300,00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

16. Cash

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Case number (if known) Document

Debtor 1 **Rico Xavier Richardson**

| | | | Cash | \$0.00 |
|-----|---|--|--|----------------|
| | | | s; certificates of deposit; shares in credit unions, brokerage houses, and othe h the same institution, list each. | ır similar |
| | ■ Yes | | Institution name: | |
| | 17.1. | Checking | USAA | \$100.00 |
| | 17.2. | Checking | Navy Federal | \$700.00 |
| | 17.3. | Online Account | Chime | \$700.00 |
| 18. | Bonds, mutual funds, or public Examples: Bond funds, investme | cly traded stocks ent accounts with broker | age firms, money market accounts | |
| | ☐ Yes | Institution or issuer nam | ne: | |
| 19. | Non-publicly traded stock and joint venture | interests in incorporat | ed and unincorporated businesses, including an interest in an LLC, par | tnership, and |
| | ■ No | | | |
| | Yes. Give specific information Na | about them | % of ownership: | |
| | Negotiable instruments include | personal checks, cashier those you cannot transfe | ole and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them. | |
| | | suer name: | | |
| | Retirement or pension accountexamples: Interests in IRA, ERIS | | b), thrift savings accounts, or other pension or profit-sharing plans | |
| | Yes. List each account separat | itely. of account: | Institution name: | |
| | | | | A745.00 |
| | 401(I | к) | 401k through Work | \$745.00 |
| 22. | | its you have made so tha | it you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies, or others | |
| | ■ No | | Institution name or individual: | |
| | ☐ Yes | | Institution name or individual: | |
| | ■ No | , | you, either for life or for a number of years) | |
| | Yes Issuer nam | ne and description. | | |
| | 26 U.S.C. §§ 530(b)(1), 529A(b), | | fied ABLE program, or under a qualified state tuition program. | |
| | ■ No □ Yes Institution i | name and description. So | eparately file the records of any interests.11 U.S.C. § 521(c): | |

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

| De | ebtor 1 | Case 20-20 Rico Xavier R | | | | Entered (Page 20 of (| | Desc Main |
|-----|----------------|---|---------------------------------|--------------------------|---|---------------------------|---------------------------------|---|
| | ☐ Yes. | . Give specific info | | | | | · · · · · - | |
| 26. | Paten | ts, copyrights, tra | demarks, tr | ade secrets | s, and other intellectua ceeds from royalties an | | ments | |
| | _ | . Give specific info | rmation abo | ut them | | | | |
| 27. | Exam ■ No | ses, franchises, a pples: Building pern . Give specific info | nits, exclusiv | e licenses, c | | holdings, liquor lid | censes, professional licenses | 5 |
| M | oney or | property owed to | you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax re | funds owed to yo | u | | | | | |
| | ■ No □ Yes. | . Give specific infor | mation abou | ut them, inclu | iding whether you alrea | dy filed the returns | s and the tax years | |
| 29. | Exam ■ No | y support ples: Past due or lo | · | mony, spous | al support, child suppor | t, maintenance, d | ivorce settlement, property s | ettlement |
| 30. | Exam | amounts someor aples: Unpaid wage benefits; unp | s, disability i aid loans yo | insurance pa | | fits, sick pay, vaca | ation pay, workers' compens | sation, Social Security |
| 31. | | sts in insurance poples: Health, disab | | nsurance; he | alth savings account (H | SA); credit, home | owner's, or renter's insuranc | e |
| | | . Name the insuran | | of each poli ny name: | cy and list its value. | Benef | iciary: | Surrender or refund value: |
| | | | Term I | Life throug | h work | Debte | or's daughters | \$0.00 |
| 32. | If you some | | of a living to | | omeone who has died proceeds from a life ins | | are currently entitled to recei | ve property because |
| 33. | Exam ■ No | oples: Accidents, er | nployment d | | ou have filed a lawsuit rrance claims, or rights t | | nd for payment | |
| 2 / | | Describe each cla | | alaima et e | voru natura inaludis s | counteralsims - | f the debtor and rights to | sot off claims |
| J4. | ■ No | . Describe each cla | · | CIAIIIIS OI E | very nature, including | Countercialitis 0 | i ilie uebioi allu fights to s | oci (iii Ciailli) |
| 35 | | nancial assets yo | | ready list | | | | |
| | ■ No | . Give specific info | | . zaay not | | | | |

Official Form 106A/B Schedule A/B: Property page 5

Case 20-20194-jrs Doc 1 Filed 01/31/20 Entered 01/31/20 15:27:29 **Desc Main**

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Case number (if known) Document Debtor 1 **Rico Xavier Richardson** Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,245.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$20,680.00 Part 3: Total personal and household items, line 15 57. \$3,300.00 Part 4: Total financial assets, line 36 58. \$2,245.00

Total personal property. Add lines 56 through 61... \$26,225.00 Copy personal property total \$26,225.00 Total of all property on Schedule A/B. Add line 55 + line 62 \$26,225.00

\$0.00

\$0.00

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

Part 6: Total farm- and fishing-related property, line 52

59.

61.

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| Fill in this infor | rmation to identify your | | | |
|------------------------|--------------------------|----------------------------|--------------------------|--------------------------------------|
| Debtor 1 | Rico Xavier Richa | ardson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT DIVISION | OF GEORGIA - GAINESVILLE | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | Claim a | s Exempt |
|---------|----------|---------|-----------|---------|----------|
|---------|----------|---------|-----------|---------|----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 2014 Nissan Altima 84000 miles Line from Schedule A/B: 3.1 | \$6,400.00 | | \$0.00 | O.C.G.A. § 44-13-100(a)(3) |
| Enterior Gariedade / V.S. G. P | | | 100% of fair market value, up to any applicable statutory limit | |
| 2013 Volkswagon Passat 115000 miles | \$4,100.00 | | \$0.00 | O.C.G.A. § 44-13-100(a)(3) |
| Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2008 GMC Yukon 213175 miles Doesn't Run | \$3,000.00 | | \$0.00 | O.C.G.A. § 44-13-100(a)(3) |
| Line from Schedule A/B: 3.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2009 Honda CBR600RR9 Line from Schedule A/B: 3.4 | \$4,180.00 | | \$704.00 | O.C.G.A. § 44-13-100(a)(3) |
| Elle Holli Genedale A.E. G | | | 100% of fair market value, up to any applicable statutory limit | |
| 2012 Dodge Challenger Not Running | \$3,000.00 | | \$3,000.00 | O.C.G.A. § 44-13-100(a)(3) |
| Line from Schedule A/B: 3.5 | | | 100% of fair market value, up to any applicable statutory limit | |

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| or 1 _ R | Rico Xavier Richardson | Document | | Case number (if known) | |
|------------------|---|--------------------------------------|-----|---|---------------------------------------|
| | scription of the property and line on le A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemptio |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | om Furniture, W/D m Schedule A/B: 6.1 | \$1,200.00 | | \$1,200.00 | O.C.G.A. § 44-13-100(a)(4) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | 1 Laptop, 1 Printer, 2 Game ns, Cell Phone, I-Pad | \$800.00 | | \$800.00 | O.C.G.A. § 44-13-100(a)(4) |
| Line fro | m Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2 Pisto | ols m <i>Schedule A/B</i> : 10.1 | \$150.00 | | \$150.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothe | es m Schedule A/B: 11.1 | \$250.00 | | \$250.00 | O.C.G.A. § 44-13-100(a)(4) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ches, Earrings, Bracelet m Schedule A/B: 12.1 | \$600.00 | | \$500.00 | O.C.G.A. § 44-13-100(a)(5) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ches, Earrings, Bracelet m Schedule A/B: 12.1 | \$600.00 | | \$100.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| 2 Bullo | dogs m <i>Schedule A/B</i> : 13.1 | \$300.00 | | \$300.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| Cash _ine fro | m Schedule A/B: 16.1 | \$0.00 | | \$0.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ing: USAA m Schedule A/B: 17.1 | \$100.00 | | \$100.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ing: Navy Federal m Schedule A/B: 17.2 | \$700.00 | | \$700.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Account: Chime m Schedule A/B: 17.3 | \$700.00 | | \$700.00 | O.C.G.A. § 44-13-100(a)(6) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | : 401k through Work m Schedule A/B: 21.1 | \$745.00 | | \$745.00 | O.C.G.A. § 44-13-100(a)(2.1)(D) |
| | | | | 100% of fair market value, up to any applicable statutory limit | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |

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| Terr Ben Line | INICO NAVIEL INICIIALUSULI | Case number (ii known) | | | | | |
|---------------------|--|---|---------------------------------------|---|------------------------------------|--|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | · · · · · · · · · · · · · · · · · · · | | Specific laws that allow exemption | | |
| | | Copy the value from Check only one box for each exemption. Schedule A/B | | | | | |
| | Term Life through work Beneficiary: Debtor's daughters | \$0.00 | ■ \$0.00 | | O.C.G.A. § 44-13-100(a)(8) | | |
| | Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every | | | led on or after the date of adjustme | nt.) | | |
| | ■ No | | | | | | |
| | ☐ Yes. Did you acquire the property cover | red by the exemption wi | thin 1 | ,215 days before you filed this case | ? | | |
| | □ No | | | | | | |
| | ☐ Yes | | | | | | |

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| | | Document | Page 25 | of 66 | | |
|--------------------------------------|-------------------------|---|-------------------|--|--------------------------|-------------------|
| Fill in this informat | ion to identify yοι | ır case: | | | | |
| Debtor 1 | Rico Xavier Ric | hardson | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankr | uptcy Court for the: | NORTHERN DISTRICT OF GE DIVISION | EORGIA - GAI | NESVILLE | | |
| Case number | | | | | | |
| (if known) | | | | | | if this is an |
| | | | | | amend | led filing |
| Official Form 1 | 106D | | | | | |
| | | Who Have Claims | Secure | hy Propert | V | 12/15 |
| ochedule D | . Creditors | Wile Have Claims | <u>Jecui e</u> | a by i Topert | <u>y</u> | 12/13 |
| | | If two married people are filing togeth out, number the entries, and attach it | | | | |
| number (if known). | iaitionai i age, iii it | out, number the chines, and attach it | 10 1113 101111. 0 | in the top of any addition | nai pages, write your na | inc una casc |
| . Do any creditors have | ve claims secured by | y your property? | | | | |
| □ No. Check this | s box and submit t | his form to the court with your other | schedules. Y | ou have nothing else t | o report on this form. | |
| Yes. Fill in all | of the information | below. | | | | |
| Part 1: List All S | ecured Claims | | | | | |
| | | more than one secured claim, list the cre | ditor congretaly | Column A | Column B | Column C |
| for each claim. If more | than one creditor has | a particular claim, list the other creditors | s in Part 2. As | Amount of claim | Value of collateral | Unsecured |
| much as possible, list the | ne claims in alphabeti | cal order according to the creditor's nam | ie. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 American Cy | /cle Finance | Describe the property that secures | the claim: | \$3,476.00 | \$4,180.00 | \$0.00 |
| Creditor's Name | | 2009 Honda CBR600RR9 | | | | |
| | | | | | | |
| 5 Mill Street | NI. | As of the date you file, the claim is: | Check all that | | | |
| Marlborough | | apply. | | | | |
| Number, Street, City | | ☐ Contingent☐ Unliquidated | | | | |
| Number, Street, Oit | y, State & Zip Code | ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | An agreement you made (such as | mortgage or sec | cured | | |
| Debtor 2 only | | car loan) | o.tgago o. oot | | | |
| ☐ Debtor 1 and Debto | r 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At least one of the o | lebtors and another | ☐ Judgment lien from a lawsuit | - | | | |
| ☐ Check if this claim community debt | relates to a | Other (including a right to offset) | Title Lien | | | |
| | Opened 2/15/18 | | | | | |

8534

Last 4 digits of account number

Last Active

Date debt was incurred 11/26/19

| Debtor 1 Rico Xavier Richardson | | | Case number (if known) | | | | |
|---|--|-----------------|------------------------|------------|------------|--|--|
| First Name Middle N | ame Last Name | | • | | | | |
| 2.2 Bridgecrest | Describe the property that secures the o | claim: | \$15,741.00 | \$6,400.00 | \$9,341.00 | | |
| Creditor's Name | 2014 Nissan Altima 84000 miles | s | | <u> </u> | | | |
| 7300 East Hampton | | | | | | | |
| Avenue | As of the date you file, the claim is: Chec | ck all that | | | | | |
| Suite 100 Mesa, AZ 85209 | apply. | | | | | | |
| | ☐ Contingent | | | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | | | |
| Debtor 1 only | An agreement you made (such as mort | rane or secured | | | | | |
| Debtor 2 only | car loan) | gage or secured | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechan | nic's lien) | | | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | • | | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | le Lien | | | | | |
| Date debt was incurred 11/29/19 2.3 Bridgecrest | Last 4 digits of account number Describe the property that secures the of | 9501 | \$9,903.00 | \$4,100.00 | \$5,803.00 | | |
| Creditor's Name | 2013 Volkswagon Passat 11500 | | ψ3,303.00 | Ψ+,100.00 | ψ3,003.00 | | |
| 7300 East Hampton | miles | | | | | | |
| Avenue | | | | | | | |
| Suite 100 | As of the date you file, the claim is: Checapply. | ck all that | | | | | |
| Mesa, AZ 85209 | Contingent | | | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | | | |
| | ☐ Disputed | | | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | | |
| Debtor 1 only | An agreement you made (such as mort | gage or secured | | | | | |
| Debtor 2 only | car loan) | | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) | | nic's lien) | | | | | |
| At least one of the debtors and another Judgment lien from a lawsuit | | 1-11 | | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | le Lien | | | | | |
| Opened | | | | | | | |
| 10/15 Last | | | | | | | |
| Active Date debt was incurred 11/15/19 | Last 4 digits of account number | 8401 | | | | | |
| 11/10/10 | | | | | | | |

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| Debtor 1 Rico Xavier Richardson | | | Case number (if known) | | | |
|---|--|--|--------------------------|------------|------------|--|
| First Name | Middle N | ame Last Name | • | | | |
| 2.4 Credit Acceptar | nce | Describe the property that secures the claim: | \$12,493.00 | \$3,000.00 | \$9,493.00 | |
| Creditor's Name Reg. Agent: Corporation Service Company 40 Technology Parkway South Suite 300 Norcross, GA 30092 2008 GMC Yukon 213175 miles Doesn't Run As of the date you file, the claim is: Check all that apply. Contingent | | | | | | |
| Number, Street, City, Sta Who owes the debt? Che | te & Zip Code | ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | An agreement you made (such as mortgage or s car loan) | secured | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit | | Statutory lien (such as tax lien, mechanic's lien) | | | | |
| | | Other (including a right to offset) Title Lien | 1 | | | |
| | Opened 10/18 Last Active 12/08/19 | Last 4 digits of account number 4289 |) | | | |
| • | | Column A on this page. Write that number here: the dollar value totals from all pages. | \$41,613.0 \$41,613.0 | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | Document | Page | 28 of 6 | 66 | _ | |
|--|---|---|------------------------------|------------------------------|---|---|---|
| Fill in this infor | mation to identify your o | case: | | | | | |
| Debtor 1 | Rico Xavier Richa | rdson | | | | | |
| 2 00101 1 | First Name | Middle Name | Last Nam | ie | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Nam | e | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF G | EORGIA - | GAINESVI | ILLE | | |
| Case number | | | | | | | |
| (if known) | | | | | | _ | ck if this is an inded filing |
| Official For | | | | | | | |
| Schedule E | E/F: Creditors W | ho Have Unsecured | Claim | S | | | 12/15 |
| Schedule G: Exect Schedule D: Credi | utory Contracts and Unexpi tors Who Have Claims Secu ntinuation Page to this page | that could result in a claim. Also lired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | Do not incl needed, c | ude any creo opy the Part | ditors with partially you need, fill it out, | secured claims that number the entries | at are listed in s in the boxes on the |
| Part 1: List A | All of Your PRIORITY Un | secured Claims | | | | | |
| 1. Do any credit | ors have priority unsecured | d claims against you? | | | | | |
| ☐ No. Go to | Part 2. | | | | | | |
| Yes. | | | | | | | |
| identify what to possible, list the | ype of claim it is. If a claim hat ne claims in alphabetical orde | i. If a creditor has more than one prices both priority and nonpriority amount r according to the creditor's name. If tricular claim, list the other creditors | nts, list that you have r | claim here ar | nd show both priority | and nonpriority amo | unts. As much as |
| (For an explar | nation of each type of claim, se | ee the instructions for this form in the | e instruction | booklet.) | | | |
| | | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 Georgi | a Department of Reve | enue Last 4 digits of accou | ınt number | | \$121.00 | | |
| Priority C | reditor's Name | <u> </u> | | | | | |
| | iance Division | When was the debt in | curred? | 2018 | | _ | |
| 1800 C | Bankruptcy entury BLVD NE Suite ı, GA 30345-3202 | e 9100 | | | | | |
| | Street City State Zip Code | As of the date you file | e, the claim | is: Check a | II that apply | | |
| Who incurre | ed the debt? Check one. | ☐ Contingent | | | | | |
| Debtor 1 | only | ☐ Unliquidated | | | | | |
| Debtor 2 | only | ☐ Disputed | | | | | |
| Debtor 1 | and Debtor 2 only | Type of PRIORITY un | secured cl | aim: | | | |
| ☐ At least o | one of the debtors and anothe | r Domestic support o | bligations | | | | |
| ☐ Check if | this claim is for a commun | Taxes and certain o | other debts | you owe the | government | | |
| Is the claim | subject to offset? | ☐ Claims for death or | | | | | |
| ■ No | | Other. Specify | | | | | |
| ☐ Yes | | | ax liabili | .y | | | _ |

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| Debt | or 1 Rico Xavier Richardson | | Case number | (if known) | | | |
|--------|--|--|------------------------|----------------------|--------------------------|-----------------------------|--|
| 2.2 | IRS | Last 4 digits of account number | | \$3,200.00 | \$3,200.00 | \$0.00 | |
| | Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room 400 Atlanta, GA 30308 | When was the debt incurred? | 2018 | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that an | ylqq | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | . , | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the governn | nent | | | |
| | Is the claim subject to offset? | Claims for death or personal inju | ury while you were i | ntoxicated | | | |
| | ■ No | Other. Specify | | | | | |
| | □Yes | Tax liability | / | | | | |
| t t | List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other Part 2. | laim. For each claim listed, identify wh | at type of claim it is | . Do not list claim | s already included in Pa | rt 1. If more on Page of | |
| 4.4 | Canital One | Land Addition of an arms to comb | 0005 | | i otai ciai | | |
| 4.1 | Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code | When was the debt incurred? As of the date you file, the clai | Opened 10 12/09/19 | D/15 Last Act | tive | \$151.00 | |
| | Who incurred the debt? Check one. | <u>-</u> | | · · | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecu | ıred claim: | | | | |
| | \square Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a s | eparation agreemer | nt or divorce that y | you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sha | | | | | |
| | Yes | Other Specify Credit Card Multiple Accounts | | | | | |

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Debtor 1 Rico Xavier Richardson Document Page 30 of 66 Case number (if known)

| 4.2 | Chromecapitl | Last 4 digits of account number | 0030 | \$7,793.00 |
|-----|--|--|---|-------------|
| | Nonpriority Creditor's Name 3073 S Horseshoe Drive 206 | — When was the debt incurred? | Opened 1/02/16 Last Active 10/26/16 | |
| | Naples, FL 34104 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Automobile | e Lease Deficiency | |
| 4.3 | Credit Acceptance | Last 4 digits of account number | 4289 | \$0.00 |
| | Nonpriority Creditor's Name 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034 | When was the debt incurred? | Opened 10/18 Last Active 12/08/19 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Notice Only | <u> </u> | |
| 4.4 | FedLoan Servicing Nonpriority Creditor's Name | Last 4 digits of account number | 0007 | \$32,475.00 |
| | Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | Opened 06/18 Last Active 11/30/19 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □ Yes | Other. Specify | | |
| | | Educationa | I Multiple Accounts | |

Entered 01/31/20 15:27:29 Case 20-20194-jrs Doc 1 Filed 01/31/20 Desc Main Page 31 of 66 Case number (if known) Document Debtor 1 Rico Xavier Richardson 4.5 \$1,836.00 First PREMIER Bank Last 4 digits of account number 9253 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/17 Last Active Po Box 5524 When was the debt incurred? 11/11/17 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Multiple Accounts ☐ Yes 4.6 Genesis Bc/Celtic Bank Last 4 digits of account number 8379 \$126.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 05/19 Last Active Po Box 4477 When was the debt incurred? 12/20/19 Beaverton, OR 97076 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 \$450.00 **Georgia Department of Revenue** Last 4 digits of account number Nonpriority Creditor's Name **Compliance Division** When was the debt incurred? 2009, 2010, 2011, 2013 **ARCS Bankruptcy** 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another

☐ Check if this claim is for a community

debt Is the claim subject to offset?

■ No ☐ Yes Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Stale Taxes

Case 20-20194-jrs Doc 1 Filed 01/31/20 Entered 01/31/20 15:27:29 Page 32 of 66 Case number (if known) Document Debtor 1 Rico Xavier Richardson 4.8 \$27,369.00 **Harley Davidson Financial** Last 4 digits of account number 4344 Nonpriority Creditor's Name Reg. Agent: CT Corporation System Opened 07/16 Last Active 301 S Bedford Street When was the debt incurred? 10/14/19 Suite 1 Madison, WI 53703 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Automobile Deficiency ☐ Yes 4.9 **IRS** Last 4 digits of account number \$74,901.00 Nonpriority Creditor's Name 401 W. Peachtree St., NW When was the debt incurred? 2009, 2010, 2011, 2013, Stop #334-D **Room 400** Atlanta, GA 30308 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Stale Taxes** \$461.00 Jefferson Capital Systems, LLC 7003 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1999 When was the debt incurred? **Opened 12/17** Saint Cloud, MN 56302 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Fingerhut** Other. Specify ☐ Yes **Direct Mrkting**

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Debtor 1 Rico Xavier Richardson Document Page 33 of 66 Case number (if known)

| 4.1 1 | LVNV Funding/Resurgent Capital | Last 4 digits of account number | 7627 | | \$1,142.00 | | |
|----------|--|---|---|--------------------------|------------|--|--|
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497 | - When was the debt incurred? | Opened 03/18 | | | | |
| | Greenville, SC 29603 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that app | ly | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharin | g plans, and other sir | nilar debts | | | |
| | ☐ Yes | · | Company Accou | | | | |
| 4.1 | PNC Bank, N.A. | Last 4 digits of account number | | | \$34.00 | | |
| | Nonpriority Creditor's Name William Demchak, CEO 222 Delaware Avenue | When was the debt incurred? | | | | | |
| | Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that app | у | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | <u> </u> | | | | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or o | divorce that you did not | | | |
| | No | Debts to pension or profit-sharin | g plans, and other sir | nilar debts | | | |
| | Yes | Other. Specify Overdraft | | | | | |
| 4.1 | Prestige Financial Svc | Last 4 digits of account number | 3571 | | \$748.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 351 W Opportunity Way Draper, UT 84020 | When was the debt incurred? | Opened 02/11 5/02/13 | Last Active | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that app | y | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | □Yes | ■ Other. Specify Automobile Deficiency | | | | | |

Official Form 106 E/F

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Page 34 of 66 Case number (if known) Document Debtor 1 Rico Xavier Richardson

| 4.1 | Snap Finance | Last 4 digits of account number | | \$1,200.00 | | | |
|----------|--|---|---|------------|--|--|--|
| | Nonpriority Creditor's Name 1760 W. 2100 S. #26561 Salt Lake City, UT 84199 | When was the debt incurred? | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other. Specify Account | | | | | |
| 4.1 5 | USAA Federal Savings Bank | Last 4 digits of account number | | \$500.00 | | | |
| | Nonpriority Creditor's Name Stuart Blain Parker, CEO 10750 Mcdermott Freeway San Antonio, TX 78288 | When was the debt incurred? | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharir | g plans, and other similar debts | | | | |
| | ☐ Yes | | g p.a, a cure. ca. acce | | | | |
| | Li tes | Other. Specify Overdraft | | | | | |
| 4.1 6 | Zales/Genesis FS | Last 4 digits of account number | 5578 | \$333.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 | When was the debt incurred? | Opened 04/17 Last Active 12/21/19 | | | | |
| | Beaverton, OR 97076 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify Charge Account | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|------------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 3,321.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 3,321.00 |
| | 0,1 | | • | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 32,475.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 117,044.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 149,519.00 |

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| Fill in this infor | mation to identify your | | | | |
|------------------------|--------------------------|-------------------------------|--------------------------|---|--------------------------------------|
| Debtor 1 | Rico Xavier Richa | ardson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT DIVISION | OF GEORGIA - GAINESVILLI | E | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Progressive Leasing 256 West Data Drive Draper, UT 84020 | Furniture in Estranged Wife's home, she needs to pay; In Debtor's name only |

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| | | | the Paul of Oro | <u> </u> | |
|---------------------------------------|---|---|--|--|-----------|
| Fill in thi | s information to identify your | case: | | | |
| Debtor 1 | Rico Xavier Rich | ardson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | ling) First Name | Middle Name | Last Name | | |
| , | 3, | | | | |
| United St | ates Bankruptcy Court for the: | DIVISION | OF GEORGIA - GAINESVI | | |
| Case nur | nber | | | | |
| (if known) | | | | Check if this is | |
| | | | | amended filing | |
| Officia | al Form 106H | | | | |
| Sche | dule H: Your Cod | ebtors | | | 12/15 |
| | <u></u> | | | | |
| people ar fill it out, your nam | e filing together, both are equ | ially responsible for supper boxes on the left. Attach). Answer every question | olying correct information. In the Additional Page to the | omplete and accurate as possible. If two ma . If more space is needed, copy the Addition nis page. On the top of any Additional Pages a codebtor | nal Page, |
| _ | , | you are ming a joint oase, | do not not officer opodoo do t | a codestor. | |
| | | | | | |
| ■ Ye | es | | | | |
| | thin the last 8 years, have you na, California, Idaho, Louisiana | | | (Community property states and territories incluon, and Wisconsin.) | ade |
| ■ No | o. Go to line 3. | | | | |
| □Y€ | es. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in lin Form | e 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make sure | your spouse is filing with you. List the perso e you have listed the creditor on Schedule D). Use Schedule D, Schedule E/F, or Schedul | Official |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe to Check all schedules that apply: | he debt |
| 3.1 | Evelyn Richardson | | | ■ Schedule D, line 2.3 | |
| | 5630 Tallantworth Xing | | | ☐ Schedule E/F, line | |
| | Cumming, GA 30040 | | | ☐ Schedule G | |
| | | | | Bridgecrest | |
| 3.2 | Inaya Richardson | | | ■ Schedule D, line 2.2 | |
| | 4502 White Oak Ave | | | ☐ Schedule E/F, line | |
| | Baltimore, MD 21215 | | | ☐ Schedule G | |
| | | | | Bridgecrest | |

| Fill | in this information to identify your ca | ase: | | | | | | | |
|-------------|--|--|---|-----------------|-------|--------------------|--------------------------|----------------------------|----------|
| Del | otor 1 Rico Xavier | Richardson | | | | | | | |
| | otor 2 | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC GAINESVILLE DIVISI | | - | _ | | | | |
| | se number | | - | | | | ded filing ment showi | ng postpetition | |
| 0 | fficial Form 106I | | | | | 13 incom | | following date: | |
| S | chedule I: Your Inc | ome | | | | IVIIVI / DD | | | 12/1 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. the Describe Employment | r spouse is not filing w | ith you, do not in | clude inforr | natio | n about your s | pouse. If n | nore space is | needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | 2 or non- | filing spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | □ Em | | | |
| | information about additional employers. | | ☐ Not employe | ed | | ☐ Not | employed | | |
| | Include part-time, seasonal, or | Occupation | IT Specialist | | | | | | |
| | self-employed work. | Employer's name | Can Capital, | Inc. | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 2015 Vaughn Bldg 500, Ste Kennesaw, G | 500 | | | | | |
| | | How long employed t | here? 4 ye | ars | | | | | |
| Par | t 2: Give Details About Mor | thly Income | | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If | you have nothing | to report for | any I | ne, write \$0 in t | ne space. Ir | nclude your no | n-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informa | ation for all e | emplo | yers for that per | son on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or lling spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, or | | | 2. | \$ | 6,088.00 | \$ | N/A | |
| 3. | Estimate and list monthly overti | ime pay. | | 3. | +\$ | 0.00 | _ +\$ _ | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 6,088.00 | \$_ | N/A | |

Official Form 106I Schedule I: Your Income page 1

| Deb | tor 1 | Rico Xavier Richardson | _ | Case | number (<i>if known</i>) | | | | |
|-----|----------------|--|-----------------|------------|----------------------------|-----------|----------------------|----------------|------------------|
| | | | | Fo | r Debtor 1 | | Debtor i-filing s | | |
| | Copy | y line 4 here | 4. | \$ | 6,088.00 | \$ | illing 5 | N/A | |
| 5 | Liet | all payroll deductions: | | _ | | | | | _ |
| 5. | | • • | Fo | ď | 4 500 00 | ¢. | | NI/A | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$_ \$ | 1,500.00 0.00 | · \$ | | N/A N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | · \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | : - | 89.00 | · | | N/A | _ |
| | 5e. | Insurance | 5e. | \$ | 745.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | - | N/A | = |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: Flexible Healthcare Account | 5h. | + \$_ | 225.00 | + \$ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 2,559.00 | . \$_ | | N/A | _ |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 3,529.00 | \$_ | | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | · \$_ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$ \$ | 0.00 | * — \$ | | N/A | _ |
| | 8d. | Unemployment compensation | 8d. | · - | 0.00 | · | | N/A | _ |
| | 8e. | Social Security | 8e. | \$_ | 0.00 | \$ | | N/A | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: VA Disability Pension or retirement income | e 8f. 8g. | \$_ \$_ | 436.00 0.00 | \$\$ | | N/A N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h. | · - | 0.00 | | | N/A | _ |
| | 0111 | | _ ''' | | 0.00 | · • — | | | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 436.00 | \$_ | | N/A | 4 |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | 3 | 3,965.00 + \$ | | N/A | = \$ | 3,965.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | Ľ | | 5,555.55 | | | | 0,000.00 |
| 11. | State Inclu | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not | deper | | . , | • | Schedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | . 12. | \$ | 3,965.00 |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | | Combine month! | ned ly income |
| | | No. | | | | | | | |
| | | Ves Evolain: | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Debtor 1 Rico Xavier Richardson Check if this is: An amended filing A supplement showing postpetition chapter (Spouse, if filing) A supplement showing postpetition chapter (13 expenses as of the following date: MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/11 Bescribe Your Household 1. Is this a joint case? A supplement showing postpetition chapter (Information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 Describe Your Household No No Pyes. Debtor 2 live in a separate household? No O to line 2. | Filli | in this information to identify y | our case: | | | | |
|--|---------------------|--|---|---|----------------------------|---|---|
| Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - GAINESVILLE DIVISION Official Form 106J Schedule J: Your Expenses 12/11 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2: Yes, Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not state the dependents are ach dependent | Debt | tor 1 Rico Xavier | Richardson | | _ | | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: | | | | | _ | A supplement show | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No. Go to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Fill out this information for each dependent | Unite | ed States Bankruptcy Court for the | | ORGIA - | - | MM / DD / YYYY | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Answer every question. Answer every question. | 1 | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Another content of the properties of the | | | | | | | |
| information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | | | | |
| Yes. Does Debtor 2 live in a separate household? No | info nun Part | ormation. If more space is ne nber (if known). Answer eve t 1: Describe Your House | eeded, attach another sheet to this ry question. | | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No No | | | in a separate household? | | | | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents names. No Yes No Yes No Yes Part 2: Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses 4. \$ 0.00 | | | st file Official Form 106J-2, <i>Expense</i> | es for Separate House | <i>hold</i> of Deb | tor 2. | |
| Debtor 2. Do not state the dependents names. Do not yes Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ | 2. | Do you have dependents? | ■ No | | | | |
| dependents names. Yes No Yes Yes No Yes Yes No Yes Yes | | | — 1 C3. | | | • | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : <i>Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 | | | | | | | ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. | 3. | expenses of people other t | than | | | | ☐ Yes |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 | Esti exp | imate your expenses as of y enses as of a date after the | our bankruptcy filing date unless | you are using this fo oplemental <i>Schedule</i> | orm as a su J, check th | ipplement in a Cha ne box at the top o | apter 13 case to report f the form and fill in the |
| payments and any rent for the ground or lot. 4. \$ | the | value of such assistance an | | | | Your exp | enses |
| If not included in line 4: | 4. | | | . Include first mortgage | 4. \$ | S | 0.00 |
| | | If not included in line 4: | | | | | |
| 4a. Real estate taxes 4a. \$ 0.00 | | 4a. Real estate taxes | | | 4a. \$ | 3 | 0.00 |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 | | | | | | | 0.00 |
| 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 | | | | | | | |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00 | 5. | | | nome equity loans | | | |

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| Deb | tor 1 | Rico Xavier Richardson | Case num | nber (if known) | |
|-----|--------|--|----------|-----------------|-----------|
| 6. | Utilit | ies: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | \$ | 210.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 30.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| | 6d. | Other. Specify: Cellular Phone | 6d. | \$ | 516.00 |
| | | Alarm | | \$ | 50.00 |
| | | Cable/Internet | | \$ | 80.00 |
| | | Lawncare | | \$ | 160.00 |
| | | Netflix | | \$ | 15.00 |
| 7. | Food | and housekeeping supplies | | \$ | 550.00 |
| 8. | Child | dcare and children's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundry, and dry cleaning | 9. | \$ | 150.00 |
| 10. | Pers | onal care products and services | 10. | \$ | 150.00 |
| 11. | Medi | cal and dental expenses | 11. | \$ | 50.00 |
| 12. | Tran | sportation. Include gas, maintenance, bus or train fare. | | | |
| | Do no | ot include car payments. | 12. | \$ | 486.00 |
| | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| 14. | Char | itable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | | rance. | | | |
| | | ot include insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | | Life insurance | 15a. | · | 0.00 |
| | | Health insurance | 15b. | | 0.00 |
| | | Vehicle insurance | 15c. | · <u> </u> | 650.00 |
| | | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | Spec | · | 16. | \$ | 0.00 |
| 17. | | Illment or lease payments: | 47- | c | 500.00 |
| | | Car payments for Vehicle 1 | 17a. | · <u> </u> | 508.00 |
| | | Car payments for Vehicle 2 | 17b. | · | 255.00 |
| | | Other. Specify: Gym Membership | 17c. | · · | 25.00 |
| 4.0 | | Other. Specify: priority IRS | 17d. | \$ | 60.00 |
| 18. | | payments of alimony, maintenance, and support that you did not report as | 18. | \$ | 0.00 |
| 19 | | ncted from your pay on line 5, Schedule I, Your Income (Official Form 106I). It payments you make to support others who do not live with you. | 10. | \$ | 0.00 |
| 10. | Spec | • | 19. | Ψ | 0.00 |
| 20 | | r real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> | | our Income | |
| 20. | | Mortgages on other property | 20a. | | 0.00 |
| | | Real estate taxes | 20b. | · | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | · · | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · <u> </u> | 0.00 |
| | | Homeowner's association or condominium dues | 20a. | · | 0.00 |
| 21 | | r: Specify: Pet Expenses | | +\$ | 125.00 |
| ۷1. | | cipated Rent | | +\$ | 1,600.00 |
| | Anu | cipated Kent | | -Ψ | 1,000.00 |
| 22. | Calc | ulate your monthly expenses | | | |
| | 22a. | Add lines 4 through 21. | | \$ | 5,670.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 5,670.00 |
| 23. | | ulate your monthly net income. | | | |
| | | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 3,965.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 5,670.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. | | | |
| | | The result is your monthly net income. | 23c. | \$ | -1,705.00 |
| | | • | | - | |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor's wife asked him to leave in December. She alone owns the house. Debtor continues to help her with the expenses shown. Additionally, Debtor is sleeping on various friends sofas and he expects to rent an apartment soon.

| Fill in this infor | mation to identify your | case: | | |
|---|---|--|--|--------------------------------------|
| Debtor 1 | Rico Xavier Richa | ardson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF GEORGIA - GAINESVILLE | |
| | | BIVIOIOIV | _ | |
| Case number _ if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | n for Indiv | viduals Filing Under Chapte | r 7 12/15 |
| creditors hav you have leas ou must file th | | ur property, or and the lease has r within 30 days after | | |
| on the two married po | | r in a joint case, bo | oth are equally responsible for supplying correct inf | ormation. Both debtors must |
| | nd date the form. | • | . , | |
| | and accurate as possib our name and case nur | | s needed, attach a separate sheet to this form. On the | ne top of any additional pages, |
| Part 1: List Y | our Creditors Who Have | e Secured Claims | | |
| | | art 1 of Schedule [| D: Creditors Who Have Claims Secured by Property (| (Official Form 106D), fill in the |
| information be | elow. reditor and the property t | hat is collateral | What do you intend to do with the property that | Did you claim the property |
| identity the of | cultor and the property t | nat is conatoral | secures a debt? | as exempt on Schedule C? |
| | | | | |
| Creditor's A | American Cycle Finar | nce | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| Description of | f 2009 Honda CBR6 | 00RR9 | Retain the property and enter into a | Yes |
| property | 2003 Holida OBIKO | OUTTO | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt | : | | - Retain the property and [explain]. | - |
| Creditor's E | Bridgecrest | | ■ Surrender the property. | □No |
| name: | | | Retain the property and redeem it. | _ |
| Description of | f 2014 Nicoon Altim | a 84000 milaa | ☐ Retain the property and enter into a | Yes |
| property | f 2014 Nissan Altima | a 64000 Miles | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt | : | | | - |
| Creditor's E | Bridgecrest | | ■ Surrender the property. | □ No |
| | | | = Surrondor the property | LI INO |

Official Form 108

property

name:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Description of 2013 Volkswagon Passat

115000 miles

Yes

| De | btor 1 Rico Xav | ier Richardson | Case number (if k | nown) |
|--------------|--|---|--|--|
| ; | securing debt: | | | |
| | Creditor's Credi t | t Acceptance Corporation | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| ı | , | 08 GMC Yukon 213175 miles esn't Run | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| For in tl | any unexpired pe he information bel | ow. Do not list real estate leases. U | s Id in Schedule G: Executory Contracts and Unex Inexpired leases are leases that are still in effect if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. |
| De | scribe your unexp | ired personal property leases | | Will the lease be assumed? |
| Les | ssor's name: | Progressive Leasing | | ■ No |
| | | | | ☐ Yes |
| Pro | scription of leased operty: | only | s home, she needs to pay; In Debtor's nam | e |
| Unc | | ury, I declare that I have indicated r ct to an unexpired lease. | my intention about any property of my estate the | at secures a debt and any personal |
| | Rico Xavier Ri Signature of Deb | | Signature of Debtor 2 | |
| | Date Janua | ary 31, 2020 | Date | |

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| Fill in this inform | mation to identify your | | | |
|---------------------|--------------------------|----------------------------|--------------------------|--------------------------------------|
| Debtor 1 | Rico Xavier Richa | ardson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT DIVISION | OF GEORGIA - GAINESVILLE | |
| Case number _ | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Pai | t 1: Summarize Your Assets | | |
|--|--|-----|--|--------------|--------------|
| 1a. Copy line 55, Total real estate, from Schedule A/B. 1b. Copy line 62, Total personal property, from Schedule A/B. 1c. Copy line 63, Total of all property on Schedule A/B. 26,225 21c. Copy line 63, Total of all property on Schedule A/B. 22c. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3 Cohedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F. 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F. 4 149,519 Your total liabilities 194,453.0 2art 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106L) Copy your combined monthly income from line 12 of Schedule I. Copy your monthly expenses (Official Form 106L) Copy your monthly expenses from line 12 of Schedule J. Answer These Questions for Administrative and Statistical Records Are you filling for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 4 Yes 7 What kind of debt do you have? 1 Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | 1a. Copy line 55, Total real estate, from Schedule A/B | | | | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule EF: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule EF | 1c. Copy line 63, Total of all property on Schedule A/B | 1. | | \$ | 0.00 |
| Summarize Your Liabilities Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Summarize Your Liabilities Your liabilities Amount you owe | | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 26,225.0 |
| Your labilities Amount you owe | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 41,613.0 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 26,225.0 |
| Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | aı | t 2: Summarize Your Liabilities | | |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 41,613 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 41,613.0 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | | | |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F.</i> | 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | 2. | | \$ | 41,613.0 |
| Your total liabilities Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | Your total liabilities \$ 194,453.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | 3. | | \$ | 3,321.0 |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 149,519.0 |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | | Your total liabilities | \$ | 194,453.00 |
| Copy your combined monthly income from line 12 of Schedule I | Copy your combined monthly income from line 12 of Schedule I | aı | t 3: Summarize Your Income and Expenses | | |
| Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | | | \$ | 3,965.0 |
| Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | \$ | 5,670.0 |
| No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | | t 4: Answer These Questions for Administrative and Statistical Records | | |
| What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | aı | | ır other scl | nedules. |
| household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | | |
| Vous debte are not primarily consumer debte. Vous hour methics to recent on this cost of the form. Check this hoursed out written is form. | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to | i. | ■ Yes | | |
| Tour debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form | | | Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal | , family, or |

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Debtor 1 **Rico Xavier Richardson**

the court with your other schedules.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,714.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 3,321.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 32,475.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 35,796.00 |

| Fill in this informa | ation to identify your | case: | | | | | |
|--|--|--------------------------|------------------------------|-------------------------|--|--|--|
| Debtor 1 | Rico Xavier Richa | ırdson | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Banl | kruptcy Court for the: | NORTHERN DISTRICT | T OF GEORGIA - GAINESV | /ILLE | | | |
| Case number | | | | | | | |
| (if known) | | | | | ☐ Check if this is an | | |
| | | | | | amended filing | | |
| | | | | | | | |
| 000 : 15 | 4000 | | | | | | |
| Official Form | | | _ | | | | |
| Declaration | on About a | ın Individual | I Debtor's Scl | hedules | 12/15 | | |
| | | | | | | | |
| If two married peo | ple are filing together | , both are equally respo | onsible for supplying corre | ect information. | | | |
| obtaining money o | | n connection with a ban | | | ement, concealing property, or 00, or imprisonment for up to 20 | | |
| Sign | Below | | | | | | |
| Did you pay | or agree to pay some | one who is NOT an atto | rney to help you fill out ba | ankruptcy forms? | | | |
| ■ No | | | | | | | |
| Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) | | | | | | | |
| | y of perjury, I declare true and correct. | that I have read the sun | nmary and schedules filed | I with this declaration | on and | | |
| X /s/ Rico | Xavier Richardson | | X | | | | |
| Rico Xav | vier Richardson of Debtor 1 | | Signature of D | Debtor 2 | | | |
| - | | | | | | | |

Date **January 31, 2020**

| Fill in | this information to identify your case: | | | | ieck or 2A-1Si | | rected in this form and | d in Form |
|-------------------|--|--|-----------------|-------------------------------------|---------------------|--|---|-----------------------------------|
| Debto | Rico Xavier Richardson | | | | ZA-131 | ирр. | | |
| Debto | or 2 | | | | □ 1. T | here is no presi | umption of abuse | |
| (-1 | NORTHERN DIS | STRICT OF | | | ■ 2. T | he calculation to | o determine if a presu | mption of abuse |
| United | GEORGIA - GAII d States Bankruptcy Court for the: DIVISION | | | | | | nade under <i>Chapter 7</i> cial Form 122A-2). | Means Test |
| Case | number | | | | | | does not apply now be service but it could ap | |
| (II KIIOW | 11) | | | | П Ch | eck if this is a | n amended filing | <u> </u> |
| ⊃ffi∂ | cial Form 122A - 1 | | | | | icon ii tiilo io a | Tarrieriaca illing | |
| | apter 7 Statement of Your Cu | rrent M | lor | othly Inc | om | Δ | | 40/40 |
| 5116 | The 7 Statement of Tour Cu | II GIIL IV | 101 | itiny inc | ,0111 | <u> </u> | | 10/19 |
| ttach a ase nu | complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to umber (if known). If you believe that you are exempted fring military service, complete and file Statement of Exemple Calculate Your Current Monthly Income | which the ado | ditior otion | nal information a of abuse becau | applies ise you | . On the top of ar do not have prin | ny additional pages, wri narily consumer debts o | te your name and or because of |
| 1 V | What is your marital and filing status? Check one of | nlv | | | | | | |
| | ☐ Not married. Fill out Column A, lines 2-11. | ,,y . | | | | | | |
| _ | ☐ Married and your spouse is filing with you. Fill o | out both Colu | mns | A and B, lines | 2-11. | | | |
| _ | ■ Married and your spouse is NOT filing with you | | | | | | | |
| | ☐ Living in the same household and are not leg | • | | • | lumns | A and B. lines 2 | Y-11. | |
| | ■ Living separately or are legally separated. Fill | | | | | , | | ı declare under |
| | penalty of perjury that you and your spouse are living apart for reasons that do not include evad | legally sepa | rated | d under nonbar | krupto | y law that applie | es or that you and you | |
| 101 the | in the average monthly income that you received from al (10A). For example, if you are filing on September 15, the 6- 6 months, add the income for all 6 months and divide the tota uses own the same rental property, put the income from that | month period value by 6. Fill in the | vould he re: | be March 1 thro | ugh Auq de any i | gust 31. If the amoincome amount me | unt of your monthly incon ore than once. For examp | ne varied during ble, if both |
| | | | | | Colui Debte | | Column B Debtor 2 or non-filing spouse | |
| | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | , and comm | issic | ons (before all | \$ | 6,614.00 | \$ | |
| | Alimony and maintenance payments. Do not include Column B is filled in. | e payments f | rom | a spouse if | \$ | 0.00 | \$ | |
| f f | All amounts from any source which are regularly por you or your dependents, including child supportrom an unmarried partner, members of your househo and roommates. Include regular contributions from a silled in. Do not include payments you listed on line 3. | t. Include reg ld, your depe | gular ende | contributions nts, parents, | \$ | 0.00 | \$ | |
| | Net income from operating a business, profession | , or farm | | | | | | |
| | | | | otor 1 | | | | |
| | Gross receipts (before all deductions) | · · · — <u>-</u> | .00 | | | | | |
| | Ordinary and necessary operating expenses | · — | .00 | Copy here -> | ď | 0.00 | \$ | |
| | Net monthly income from a business, profession, or fa | ırm \$ | .00 | Copy Here -> | , ф | 0.00 | Φ | |
| 6. N | Net income from rental and other real property | | Deh | otor 1 | | | | |
| C | Gross receipts (before all deductions) | \$ 0. | .00 | | | | | |
| | Ordinary and necessary operating expenses | · — | .00 | | | | | |
| | Net monthly income from rental or other real property | \$ 0 | .00 | Copy here -> | \$ | 0.00 | \$ | |
| | nterest, dividends, and royalties | | | | \$ | 0.00 | \$ | |

Official Form 122A-1

Document Page 48 of 66

Rico Xavier Richardson Case number (if known)

| | | | | | | Column A Debtor 1 | | Column B Debtor 2 o non-filing | | |
|------|--|--|---|--|---|-----------------------|---------------|--------------------------------|-----------|-----------------|
| 8. | Unemploy | ment compensation | | | | \$ | 0.00 | \$ | • | |
| | Do not ente | er the amount if you contend to Security Act. Instead, list it he | hat the amoun | t received was a bene | efit under | r | | | | |
| | | | | O | .00 | | | | | |
| | For your | spouse | \$ | | | | | | | |
| 9. | Pension or benefit und not include United Stat disability, o pay paid un does not ex | r retirement income. Do not ler the Social Security Act. Als any compensation, pension, les Government in connection or death of a member of the under chapter 61 of title 10, the acceed the amount of retired parties der any provision of title 10 of | include any and | nount received that w tated in the next sent or allowance paid by the ty, combat-related injuses. If you received ar pay only to the extent or would otherwise be | ence, do ne ury or ny retired that it | | 0.00 | \$ | | |
| 10. | Do not inclureceived as domestic te | om all other sources not listed any benefits received und a victim of a war crime, a criperrorism; or compensation, per ses Government in connection | ler the Social S me against hur nsion, pay, anr | Security Act; payment manity, or internation nuity, or allowance pa | s al or iid by the |) | | | | |
| | | r death of a member of the un | | es. If necessary, list of | other | | | | | |
| | | a separate page and put the rior Home Depot Job | ioiai D e low. | | | \$ | 100.00 | \$ | | |
| | · <u>· · ·</u> | To Home Depot Cob | | | | \$ | 0.00 | \$ | | |
| | To | otal amounts from separate pa | iges, if any. | | | \$ | 0.00 | \$ | | |
| | | | | 0.11 1.40.6 | • | · | 7 | | 7 | |
| 11. | | your total current monthly in nn. Then add the total for Colu | | | \$ | 6,714.00 | + 5 | | = \$ | 6,714.00 |
| | | | | | | | | | Total o | current monthly |
| Part | 2: Dete | ermine Whether the Means | Γest Applies t | o You | | | | | | |
| 10 | Calculate | vour ourrant manthly incom | o for the year | Collow those stone. | | | | | | |
| 12. | | your current monthly incom | - | • | | • | | | | |
| | 12a. Copy | your total current monthly inco | ome from line | 11 | | Cop | by line 11 r | iere=> | \$ | 6,714.00 |
| | Multip | ly by 12 (the number of month | ns in a year) | | | | | | X | |
| | 12b. The re | esult is your annual income for | this part of the | e form | | | | 121 | o. \$ | 80,568.00 |
| 13. | Calculate t | the median family income th | at applies to | you. Follow these ste | eps: | | | | | |
| | Fill in the st | tate in which you live. | | GA | | | | | | |
| | Fill in the n | umber of people in your house | ehold. | 1 | | | | | | |
| | | nedian family income for your | | of household | | | | 13. | • | 47,953.00 |
| | To find a lis | st of applicable median income n. This list may also be availal | e amounts, go | online using the link | specified | I in the sepa | rate instruc | | \$ | |
| 14. | How do the | e lines compare? | | | | | | | | |
| | 14a. 🛚 | Line 12b is less than or equal Go to Part 3. | al to line 13. O | n the top of page 1, c | heck box | x 1, <i>There i</i> s | no presum | ption of abu | se. | |
| | 14b. | Line 12b is more than line 1 Go to Part 3 and fill out Forr | • | of page 1, check box | 2, The pi | resumption o | of abuse is o | determined b | y Form 1 | 22A-2. |
| Part | 3: Sign | n Below | | | | | | | | |
| | By sig | ning here, I declare under per | nalty of perjury | that the information | on this st | tatement and | l in any atta | chments is t | rue and c | orrect. |
| | Ric | Rico Xavier Richardson o Xavier Richardson nature of Debtor 1 | | | | | | | | |
| | Sigi | וומנמוט טו בטוטו ו | | | | | | | | |
| ĺ | Date lar | nuary 31, 2020 | | | | | | | | |

Debtor 1

| Debtor 1 | Rico Xavier Richardson | Case number (if known) | |
|----------|------------------------|------------------------|--|
| | MM/DD/YYYY | | |

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

| Fill in this info | rmation to identify you | r case: | Check the appropriate box as directed in |
|--------------------------------|---------------------------|---|---|
| Debtor 1 | Rico Xavier Richard | son | lines 40 or 42: |
| Debtor 2 (Spouse, if filing | 7) | | According to the calculations required by this |
| (Opodoo, ii iiiii) | 9) | NORTHERN DISTRICT OF | Statement: |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT OF GEORGIA - GAINESVILLE DIVISION | ■ 1. There is no presumption of abuse. |
| Case number (if known) | | | ☐ 2. There is a presumption of abuse. |
| , | | | ☐ Check if this is an amended filing |
| Official Fo | orm 122A - 2 | | |
| Chapter | 7 Means Test | Calculation | 04/19 |
| Γο fill out this f | orm, you will need your | completed copy of Chapter 7 Statement of | of Your Current Monthly Income (Official Form 122A-1). |
| space is neede | d, attach a separate she | | er, both are equally responsible for being accurate. If more which additional information applies. On the top any |

| Par | t 1: | Determine Your Adjusted Income | | | | | |
|-----|----------------|---|---------------------------|---------------------------------------|-------------------|---------------|-----------|
| 1. | Сору | your total current monthly income. Cop | py line 11 from Of | ficial Form 122A | -1 here=> | \$ | 6,714.00 |
| 2. | Did y | ou fill out Column B in Part 1 of Form 122A-1? | | | | | |
| | ■ No | . Fill in \$0 for the total on line 3. | | | | | |
| | ☐ Ye | s. Is your spouse Filing with you? | | | | | |
| | | No. Go to line 3. | | | | | |
| | | Yes. Fill in \$0 for the total on line 3. | | | | | |
| 3. | Adjus house | st your current monthly income by subtracting any part ehold expenses of you or your dependents. Follow these | of your spouse's e steps: | income not use | d to pay for the | | |
| | | ue 11, Column B of Form 122A–1, was any amount of the increase of you or your dependents? | ncome you reported | for your spouse | NOT regularly use | d for the ho | usehold |
| | ■ No | . Fill in 0 for the total on line 3. | | | | | |
| | ☐ Ye | ss. Fill in the information below: | | | | | |
| | | | | | | | |
| | | State each purpose for which the income was used | | ill in the amount | | | |
| | | For example, the income is used to pay your spouse's tax support other than you or your dependents. | | re subtracting fr our spouse's inc | | | |
| | | | \$_ | | | | |
| | | | \$ | | | | |
| | | | \$ _ | | | | |
| | | Total. | \$ | 0.00 | | | |
| | | | | | Copy total here= | > - \$ | 0.00 |
| | | | | | | | |
| , | A =1: | Och teed in Co. | | | | \$ | 6,714.00 |
| 4. | Adjus | st your current monthly income. Subtract line 3 from line | 1. | | | Ψ | 0,1 17.00 |
| | | | | | | | |

Official Form 122A-2

Case 20-20194-jrs Doc 1 Filed 01/31/20 Entered 01/31/20 15:27:29 Desc Main Document Page 51 of 66

Debtor 1 Rico Xavier Richardson Case number (if known)

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

727.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 55.00
- 7b. Number of people who are under 65 X ______1
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 55.00 Copy here=> \$ 55.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114.00
- 7e. Number of people who are 65 or older X 0
- 7f. **Subtotal.** Multiply line 7d by line 7e. \$ ______ **0.00 Copy here=> +\$** _____ **0.00**

Debtor 1 Rico Xavier Richardson

Case number (if known)

| Loc | al Sta | andards | You must use the IRS Local Standards to ar | nswer the qu | estions in line | es 8-15. | | | | |
|------|------------|--------------|--|----------------------------|------------------------------|--------------------------|------------------|----------------|---------------------|----------|
| | | | ntion from the IRS, the U.S. Trustee Programoses into two parts: | m has divid | ed the IRS Lo | ocal Stand | ard for housin | g for | | |
| _ | | _ | tilities - Insurance and operating expenses tilities - Mortgage or rent expenses | ; | | | | | | |
| To a | answ | er the qu | estions in lines 8-9, use the U.S. Trustee P | rogram cha | rt. | | | | | |
| | | | o online using the link specified in the separat be available at the bankruptcy clerk's office. | | ns for this form | n. | | | | |
| 8. | | | utilities - Insurance and operating expense mount listed for your county for insurance and | | | | | 5, fill \$ | | 482.00 |
| 9. | Hou | ising and | utilities - Mortgage or rent expenses: | | | | | | | |
| | 9a. | | e number of people you entered in line 5, fill in your county for mortgage or rent expenses | | | | \$ 1,3 | 804.00 | | |
| | 9b. | Total ave | erage monthly payment for all mortgages and | other debts | secured by yo | our home. | | | | |
| | | contractu | late the total average monthly payment, add a ually due to each secured creditor in the 60 more ruptcy. Then divide by 60. | | | | | | | |
| | | Name of | the creditor | Average payment | • | | | | | |
| | | -NONE- | • | \$ | | | | | | |
| | | | | | | Comu | | | Repeat this | 3 |
| | | | Total average monthly payment | \$ | 0.00 | Copy here=> | -\$ | 0.00 | amount on line 33a. | |
| | 9c. | Net mort | gage or rent expense. | | | | | | | |
| | | | line 9b (total average monthly payment) from xpense). If this amount is less than \$0, enter \$ | | | \$ | 1,304.00 | Copy here=> | \$ | 1,304.00 |
| 10. | If yo | ou claim t | hat the U.S. Trustee Program's division of alculation of your monthly expenses, fill in | the IRS Loc any additio | cal Standard nal amount y | for housin you claim. | g is incorrect a | and | \$ | 0.00 |
| | Ex | plain why: | | | | | | | | |
| 11. | Loc | al transp | ortation expenses: Check the number of veh | nicles for whi | ch you claim | an ownersł | nip or operating | expense. | | |
| | |). Go to lin | ne 14. | | | | | | | |
| | □ 1 | . Go to lin | ne 12. | | | | | | | |
| | 2 2 | or more. | Go to line 12. | | | | | | | |
| 12. | Veh | icle opera | ation expense: Using the IRS Local Standard | ds and the n | umber of vehi | icles for wh | ich you claim th | e | | 400.00 |

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

480.00

| 13. | You may | ownership or lease expense: Using the IRS Local not claim the expense if you do not make any loan n two vehicles. | | | | | | |
|------|----------------------|--|-----------------|---------------|------------------------|-------------------|--|--------|
| Ve | hicle 1 | Describe Vehicle 1: 2008 GMC Yukon 2131 | 75 miles D | Doesn't Rui | n | | | |
| 13a. | Ownersh | ip or leasing costs using IRS Local Standard | | | \$ | 508.00 | | |
| 13b. | - | monthly payment for all debts secured by Vehicle 1 clude costs for leased vehicles. | | | | | | |
| | are contr | ate the average monthly payment here and on line actually due to each secured creditor in the 60 monty. Then divide by 60. | | | t | | | |
| | Nan | ne of each creditor for Vehicle 1 | Average payment | monthly | | | | |
| | Cre | dit Acceptance Corporation | \$ | 208.22 | | | | |
| | | Total Average Monthly Payment | \$ | 208.22 | Copy here => | -\$208 | Repeat this amount on line 33b. | |
| 13c. | | cle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0 |), enter \$0. | | \$ | 299.78 | Copy net Vehicle 1 expense here => \$ | 299.78 |
| Ve | hicle 2 | Describe Vehicle 2: 2009 Honda CBR600RF | R9 | | | | | |
| 13d. | Ownersh | ip or leasing costs using IRS Local Standard | | | . \$ | 508.00 | | |
| 13e. | Average leased ve | monthly payment for all debts secured by Vehicle 2 shicles. | . Do not incl | ude costs for | | | | |
| | Nan | ne of each creditor for Vehicle 2 | Average payment | monthly | | | | |
| | Am | erican Cycle Finance | \$ | 60.00 | | | | |
| | | Total Average Monthly Payment | \$ | 60.00 | Copy here => -\$ | 60.0 | Repeat this amount on line 33c. | |
| 13f. | Net Vehic | cle 2 ownership or lease expense | | | | | Copy net Vehicle 2 | |
| | Subtract | line 13e from line 13d. if this amount is less than \$0 |), enter \$0 | | \$ | 448.00 | expense here => \$ | 448.00 |
| 14. | | ansportation expense: If you claimed 0 vehicles in tation expense allowance regardless of whether you | | | | ards, fill in the | Public \$ | 0.00 |
| 15. | also dedu | al public transportation expense: If you claimed a uct a public transportation expense, you may fill in womere than the IRS Local Standard for <i>Public Trans</i> | vhat you beli | | | | | 0.00 |
| | | | | | | | | |

| Oth | • | In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories. | for | |
|-----|---|---|-----|----------|
| 16. | self-employment taxes, soci your pay for these taxes. Ho | nount that you will actually owe for federal, state and local taxes, such as income taxes, all security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes. | | 4 500 00 |
| | Do not include real estate, s | ales, or use taxes. | \$ | 1,500.00 |
| 17. | Involuntary deductions: T contributions, union dues, a | he total monthly payroll deductions that your job requires, such as retirement nd uniform costs. | | |
| | Do not include amounts that | t are not required by your job, such as voluntary 401(k) contributions or payroll savings. | \$ | 0.00 |
| 18. | filing together, include paym | nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life ints, for a non-filing spouse's life insurance, or for any form of life insurance other than | \$ | 97.00 |
| 19. | | The total monthly amount that you pay as required by the order of a court or as spousal or child support payments. | | |
| | Do not include payments on | past due obligations for spousal or child support. You will list these obligations in line 35. | \$ | 0.00 |
| 20. | Education: The total month as a condition for your jo | ly amount that you pay for education that is either required: b. or | | |
| | | ntally challenged dependent child if no public education is available for similar services. | \$ | 0.00 |
| 21. | Childcare: The total monthl | y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. | | |
| | | r any elementary or secondary school education. | \$ | 0.00 |
| 22. | that is required for the healt | penses, excluding insurance costs: The monthly amount that you pay for health care hand welfare of you or your dependents and that is not reimbursed by insurance or paid Include only the amount that is more than the total entered in line 7. | | |
| | Payments for health insurar | nce or health savings accounts should be listed only in line 25. | \$ | 0.00 |
| 23. | for you and your dependent | lephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of by your employer. | | |
| | | r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted. | +\$ | 0.00 |
| 24. | Add all of the expenses al Add lines 6 through 23. | lowed under the IRS expense allowances. | \$ | 5,392.78 |

| Add | litional | Expense Deductions These are additional | deductions | s allowed by th | e Means Test. | | |
|-----|-------------------|---|---------------------------|---------------------------------------|--|-----|--------|
| | | Note: Do not include | any expen | se allowances | listed in lines 6-24. | | |
| 25. | insura | insurance, disability insurance, and health nce, disability insurance, and health savings accependents. | | | | r | |
| | Health | insurance | \$ | 752.00 | | | |
| | Disabi | lity insurance | \$ | 0.00 | | | |
| | Health | savings account | + \$ | 225.00 | | | |
| | Total | | \$ | 977.00 | Copy total here=> | \$ | 977.00 |
| | Do you | actually spend this total amount? | | | J | | |
| | | No. How much do you actually spend? | | | | | |
| | | Yes | \$ | | | | |
| 26. | continu | nued contributions to the care of household ue to pay for the reasonable and necessary care ousehold or member of your immediate family ve contributions to an account of a qualified ABLE | e and supp tho is unab | ort of an elderl ble to pay for su | y, chronically ill, or disabled member of uch expenses. These expenses may | \$ | 0.00 |
| 27. | | ction against family violence. The reasonably of you and your family under the Family Violence | | | | | |
| | By law | , the court must keep the nature of these expen | ses confid | ential. | | \$ | 0.00 |
| 28. | Additi line 8. | onal home energy costs. Your home energy o | osts are in | cluded in your | insurance and operating expenses on | | |
| | | pelieve that you have home energy costs that a fill in the excess amount of home energy costs | | an the home er | nergy costs included in expenses on line | | |
| | | ust give your case trustee documentation of yout claimed is reasonable and necessary. | ır actual ex | xpenses, and y | ou must show that the additional | \$ | 0.00 |
| 29. | \$170.8 | ation expenses for dependent children who a 3* per child) that you pay for your dependent clelementary or secondary school. | | | | | |
| | | ust give your case trustee documentation of you d is reasonable and necessary and not already | | | | | |
| | * Subje | ect to adjustment on 4/01/22, and every 3 years | after that f | for cases begu | n on or after the date of adjustment. | \$ | 0.00 |
| 30. | higher | onal food and clothing expense. The monthly than the combined food and clothing allowance % of the food and clothing allowances in the IR: | s in the IR | S National Star | | | |
| | | I a chart showing the maximum additional allow tions for this form. This chart may also be available. | | • | | | |
| | You m | ust show that the additional amount claimed is | easonable | and necessar | y. | \$ | 0.00 |
| 31. | | nuing charitable contributions. The amount the nents to a religious or charitable organization. 2 | | | ntribute in the form of cash or financial | +\$ | 0.00 |
| 32. | | II of the additional expense deductions. nes 25 through 31. | | | | \$ | 977.00 |

| Dedu | ctions for Debt Payment | | | | | | |
|---------|--|--|--------|-------------------------------------|-----------------------|-----------------|------------------|
| lo | eans, and other secured debt, fill in li | est in property that you own, including homes 33a through 33e. ayment, add all amounts that are contractually | | | | | |
| | reditor in the 60 months after you file fo | | | | | | |
| | Mortgages on your home: | | | | | Average payment | monthly |
| 33a. | Copy line 9b here | | | | => | \$ | 0.00 |
| | Loans on your first two vehicles: | | | | | | |
| 33b. | Copy line 13b here | | | | .=> | \$ | 208.22 |
| 33c. | | | | | => | \$ | 60.00 |
| 33d. | List other secured debts: | | | | | | |
| Name | of each creditor for other secured debt | Identify property that secures the debt | | Does payme include taxes insurance? | | | |
| | | | | □ No | | | |
| | -NONE- | | | □ Yes | | \$ | |
| | | | | | | Ψ | |
| | | | | □ No | | | |
| | | | | D Yes | | \$ | |
| | | | | □ No | | | |
| | | | | ☐ Yes | | \$ | |
| | | | | | ¬ . | Ψ | |
| | | | | | Copy | | |
| 33e. | Total average monthly payment. Add l | ines 33a through 33d | \$ | 268.22 | total here: | Φ. | 268.22 |
| 01 | r other property necessary for your s No. Go to line 35. Yes. State any amount that you mu | s secured by your primary residence, a vehicupport or the support of your dependents? st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i>) as information below. | ; ; | | | | |
| Nam | e of the creditor | Identify property that secures the debt | | Total cure amount | | Mon | thly cure unt |
| -NO | NE- | | : | \$ | ÷ 60 = | \$ | |
| | | | | | | · —— | |
| | | Tot | al \$_ | 0.00 | Copy total here | Φ. | 0.0 |
| | | | | | | | |
| | | us a priority tax, child support, or alimony - fur bankruptcy case? 11 U.S.C. § 507. | that | | | | |
| ar | | | that | | | | |
| ar _ | re past due as of the filing date of yo No. Go to line 36. | ur bankruptcy case? 11 U.S.C. § 507. these priority claims. Do not include current or | | | | | |

| Debtor 1 | Rico | Xavier Richardson | | Ca | ase n | umber (if known) | | | | |
|----------------|----------------|--|------------------|-----------------|-------|------------------|----------------|--------------|----------------|-------|
| Fo | or more | eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Bas</i> ns for this form. <i>Bankruptcy Basics</i> may also be available. | sics speci | | | | | | | |
| | l No. | Go to line 37. | | | | | | | | |
| | _ | Fill in the following information. | | | | | | | | |
| | | Projected monthly plan payment if you were filing under | r Chapte | r 13 | \$ | 80 | 00.00 | | | |
| | | Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts). | istricts in | Alabama | X | 6.60 |) | | | |
| | | To find a list of district multipliers that includes your dis the link specified in the separate instructions for this for be available at the bankruptcy clerk's office. | | | | | | Copy total | | |
| | | Average monthly administrative expense if you were fil | ing unde | r Chapter 13 | | \$52. | ~~ | here=> \$ | | 52.80 |
| | | of the deductions for debt payment. s 33e through 36. | | | | | | \$ | 376. | 37 |
| Total | Deduc | tions from Income | | | | | | | | |
| 38. A | dd all o | f the allowed deductions. | | | | | | | | |
| | | e 24, All of the expenses allowed under IRS e allowances | \$ | 5,392.7 | 8 | | | | | |
| (| Copy lin | e 32, All of the additional expense deductions | \$ | 977.0 | 0 | | | | | |
| (| Copy lin | e 37, All of the deductions for debt payment | +\$ | 376.3 | 7 | | | | | |
| | | Total deductions | \$ | 6,746.1 | 5 | Copy total I | nere | => \$ | 6,74 | 16.15 |
| Part 3: | Det | ermine Whether There is a Presumption of Abuse | | | | | | | | |
| 39. C | alculate | e monthly disposable income for 60 months | | | | | | | | |
| 3 | 39a. Co | py line 4, adjusted current monthly income | \$ | 6,714.0 | 0 | | | | | |
| 3 | 39b. Co | py line 38, Total deductions | - \$ | 6,746.1 | 5 | | | | | |
| 3 | | onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a | \$ | -32.1 | 5 | Copy here=>\$ | | -32.1 | 5 | |
| F | or the | next 60 months (5 years) | | | | J | x 60 | | | |
| | | | | | | | | | | |
| 3 | 39d. To | tal. Multiply line 39c by 60 | 39 | 9d. \$ | -1 | ,929.00 | Copy here=> | . \$ | -1,929. | 00_ |
| 40. F i | ind out | whether there is a presumption of abuse. Check the | box that | applies: | | | | | | |
| | The I | ine 39d is less than \$8,175*. On the top of page 1 of th | nis form, o | check box 1, Ti | here | is no presur | nption o | of abuse. Go | to Part 5. | |
| | | ine 39d is more than \$13,650*. On the top of page 1 of if you claim special circumstances. Go to Part 5. | f this form | n, check box 2, | The | ere is a presu | mption | of abuse. Y | ου may fill οι | ıt |
| |] The I | ine 39d is at least \$8,175*, but not more than \$13,650 | 0*. Go to | line 41. | | | | | | |
| | | to adjustment on 4/01/22, and every 3 years after that fo | | | the | date of adjus | stment. | | | |

| Debtor | 1 <u>R</u> i | ico | Xavier Richardson | Case number (if known) | |
|----------------|------------------|-------|---|--|---------------------------|
| | | | | | |
| 41. | 41 | Ia. | Fill in the amount of your total nonpriority unsecured debt. If you filled on A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. | \$x .25 | |
| | 41 | lb. | 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(| (I) \$ h | Sopy nere=> \$ |
| | | | Multiply line 41a by 0.25 | | |
| 42. | 25% c | of yo | e whether the income you have left over after subtracting all allowed decour unsecured, nonpriority debt. b box that applies: | ductions is enough to pay | |
| | | | 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> Part 5. | ere is no presumption of abus | ee. |
| | | | 39d is equal to or more than line 41b. On the top of page 1 of this form, che <i>mption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The | | |
| Part 4 | : | Giv | e Details About Special Circumstances | | |
| 43. D o | o you l | hav | e any special circumstances that justify additional expenses or adjustme | ents of current monthly inc | ome for which there is no |
| re | asona | ble | alternative? 11 U.S.C. § 707(b)(2)(B). | | |
| | l _{No.} | Go | to Part 5. | | |
| | | | in the following information. All figures should reflect your average monthly exn. You may include expenses you listed in line 25. | kpense or income adjustment | t for each |
| | | nec | u must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation ustments. | | |
| | | G | | Average monthly expense or income adjustment | |
| | | | | \$ | |
| | | | | \$ | _ |
| | | | | \$ | _ |
| | | | | \$ | _ |
| | | _ | | | - |
| Part 5 | | _ | n Below | | |
| | Ву | y sig | ning here, I declare under penalty of perjury that the information on this stater | ment and in any attachments | is true and correct. |
| | | | Rico Xavier Richardson | | |
| | | | co Xavier Richardson nature of Debtor 1 | | |
| | Date | Ja | nuary 31, 2020 | | |
| | | ΜN | I/DD /YYYY | | |

United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - GAINESVILLE DIVISION

| In re | Rico Xavier Richardson | Debtor(s) | Case No. Chapter | 7 | | | | |
|--------|----------------------------------|--|---------------------|-----------------------|--|--|--|--|
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | |
| Γhe ab | ove-named Debtor hereby verifies | s that the attached list of creditors is true and corr | ect to the best | of his/her knowledge. | | | | |
| Date: | January 31, 2020 | /s/ Rico Xavier Richardson | | | | | | |
| | | Rico Xavier Richardson Signature of Debtor | | | | | | |

American Cycle Finance 5 Mill Street N Marlborough, MA 01752

Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chromecapitl 3073 S Horseshoe Drive 206 Naples, FL 34104

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Credit Acceptance Corporation Reg. Agent: Corporation Service Company 40 Technology Parkway South Suite 300 Norcross, GA 30092

Evelyn Richardson 5630 Tallantworth Xing Cumming, GA 30040

FedLoan Servicing Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106

First PREMIER Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117 Genesis Bc/Celtic Bank Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

Harley Davidson Financial Reg. Agent: CT Corporation System 301 S Bedford Street Suite 1 Madison, WI 53703

Inaya Richardson 4502 White Oak Ave Baltimore, MD 21215

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

PNC Bank, N.A. William Demchak, CEO 222 Delaware Avenue Wilmington, DE 19899

Prestige Financial Svc Attn: Bankruptcy 351 W Opportunity Way Draper, UT 84020 Progressive Leasing 256 West Data Drive Draper, UT 84020

Snap Finance
1760 W. 2100 S. #26561
Salt Lake City, UT 84199

USAA Federal Savings Bank Stuart Blain Parker, CEO 10750 Mcdermott Freeway San Antonio, TX 78288

Zales/Genesis FS Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.